## OFFICIAL FILE ILLINOIS COMMERCE COMMISSION

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PREMIER TELECOM, INC. : Application for a certificate of: interexchange authority to operate: Docket No. as a reseller of telecommunications: services within the State of Illinois. :		02-0594	COMMERCE COM
711 <u>1421 1-</u>	TELECOMMUNIC (Use additional s	RTIFICATE TO BECOME CATIONS CARRIER cheets as necessary.)	DOMMERCE COMMISSION  2002 SEP 12 A II: 0:  CHIEF CLERK'S OFFICE
GI	NERAL		<b>류 용</b> 물
1.	Applicant's Name (including d/b/a, if any) Pre	mier Telecom, Inc.	FEIN # <b>04-3594963</b>
	Address: Street 1451 West Cypress Creek	Road, Suite 300	
	City Fort Lauderdale S	State/Zip Florida 33309	
2.	Authority Requested: (Mark all that apply)	13-403 Facilities Based Inte	rexchange
		13-404 Resale of Local and/	or Interexchange
		13-405 Facilities Based Loc	al
3.	Request for waivers/variances: In applications of 404 or 13-405, waivers of Part 710 and of Secapplications for interexchange service authority 710 and Part 735 are generally requested. Please explaining why Applicant is requesting each was	ction 735.180 of Part 735 are y under Sections 13-403 and se indicate which waivers Ap	e generally requested. In 13-404, waivers of Part
	Part 710 Uniform System of Accounts for T	Telecommunications Carriers	
	Part 735 Procedures Governing the Estable Service and Issuance of Telephone Director in the State of Illinois		
	Section 735.180 Directories		
	Other		

4.	For all applicants requesting local exchange authority under Section 13-404 or Section 13-405, please complete the following:	
	(a) the Standard Questions for Applicants Seeking Local Exchange Service Authority found in	
	Appendix A of this document  (b) the 9-1-1 Questions for Applicants Seeking Local Exchange Service Authority found in	
	Appendix B of this document; (c) the Financial Questions for Applicants Seeking Local Exchange Service Authority found in	
	Appendix C of this document; and	
	(d) if applicable, the Prepaid Service Questions for Applicants Seeking Local Exchange Service Authority found in Appendix D of this document.	
5.	In what area of the state does the Applicant propose to provide service?  Applicant intends to provide service throughout the State of Illinois	
6.	Please attach a sheet designating contact persons to work with Staff on the following: <ul> <li>(a) issues related to processing this application</li> <li>(b) consumer issues</li> </ul>	
	<ul> <li>(c) customer complaint resolution</li> <li>(d) technical and service quality issues</li> </ul>	
	(e) "tariff" and pricing issues	
	(f) 9-1-1 issues (g) security/law enforcement	
	Please identify each contact person's (i) name, (ii) title, (iii) mailing address,(iv) telephone number, (v) facsimile number, and (vi) e-mail address.  Attached as Exhibit A	
7.	Please check type of organization?	
	☐ Individual ☐ Corporation	
	Partnership Date corporation was formed May 8, 2002 In what state? Florida	
	Other (Specify)	
8.	Submit a copy of articles of incorporation/organization and a copy of certificate of authority to transact business in Illinois.  Applicant's Articles of Incorporation and Certificate of Authority to Transact Business are attached as Exhibit B.	
9.	List jurisdictions in which Applicant is offering service(s).  Applicant is a newly formed company that is seeking authority to provide the resale of telecommunications throughout the United States and has not yet begun to	
	operate in any state.	
10.	Has the Applicant, or any principal in Applicant, been denied a Certificate of Service or had its certification revoked or suspended in any jurisdiction in this or another name?	
	☐ YES (Please provide details) ☐ NO	

11.	Have there been an	y complaints or judgements levied against the Applicant in any other jurisdiction?
	☐ YES	NO NO
If Y	ES, describe fully.	
12.	Has Applicant prov	rided service under any other name?
	☐ YES	NO NO
If Y	ES, please list.	
13.	Will the Applicant	keep its books and records in Illinois?
	Applicant will in Florida. Should of Illinois, a sign diversion of final efficiency and supplied benefit with provide any near Applicant requestion.	Dursuant to 83 III. Adm Code Part 250 needs to be requested.  Initially locate its principle business operations in Fort Lauderdale, Applicant be required to keep its books and records within the State nificant hardship would be imposed on the Applicant, resulting in a funcial resources that otherwise could be utilized to increase network erve offerings which would directly benefit consumers. Moreover, nowould balance this private hardship, as the Applicant will readily excessary information to the Commission on request. Therefore, sts that pursuant to 83 III. Adm Code Part 250, the Commission allow tinue to maintain its books and records in Fort Lauderdale.
		ence of the applicant's managerial and technical resources and ability to provide be either in narrative form, resumes of key personnel, or a combination of these
15.	List officers of App	plicant.
	Ivis Santos	President/Vice President/Secretary
16.	Does any officer of provided or is curred	of Applicant have an ownership or other interest in any other entity, which has ently providing telecommunications services?
	☐ YES	⊠ NO
	If YES, list entity.	
17.	for service and deta	t bill for its service(s)? (At a minimum, describe how often the Applicant will bill ails of the billing statement.)  use the services of ILD Telecommunications to bill monthly for its

18.	How does Applicant propose to handle service, billing, and repair complaints? (At a minimum, describe Applicant's internal process for complaint resolution, the complaint escalation process, the timeframe and process by which the customer is notified by Applicant that they may seek assistance from the Commission.)  Applicant will establish a customer service department to handle customer inquiries and complaints. Customers will reach the customer service department by calling (954) 489-2723.	
19.	Will personnel be available at Applicant's business office during regular working hours to respond to inquiries about service or billing?	
20.	What telephone number(s) would a customer use to contact your company?  Customer Service: (954) 489-2723	
21.	Will Applicant abide by all Federal and State slamming and cramming laws pursuant to Section 13-902 of the Public Utilities Act and Section 258 of the 1996 Telecommunications Act?	
22.	Please describe applicant's procedures to prevent slamming and cramming of customers?  Applicant confirms all orders to change long distance service in accordance with one of three verification processes established by the FCC.	
23.	If granted authority to operate as a local exchange carrier, will the applicant abide by the following 83 Illinois Administrative Code Parts: 705, 710, 720, 725, 730, 732, 735, 755, 756, 757, 770, and 772?	
24.	24. Is Applicant aware that it must file tariffs prior to providing service in Illinois?	
FII	WANCIAL TOTAL TOTA	
25.	Please attach evidence of Applicant's financial fitness through the submission of its most current income statement and balance sheet, or other appropriate documentation of applicant's financial resources and ability to provide service.  Attached as Exhibit D	

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26.	Does Applicant utilize its own equipment and/or facilities?
	☐ YES ⊠ NO
	If YES, please list the facilities Applicant intends to utilize. Also include evidence that Applicant possesses the necessary technical resources to deploy and maintain said facilities:
	If NO, which facility provider's services does the Applicant intend to use?  Qwest
27.	Please describe the nature of service to be provided (e.g., operator services, internet, debit cards, long distance service, data services, local service, prepaid local service).  Applicant will provide the resale of long distance.
28.	Will technical personnel be available at all times to assist customers with service problems?
	YES NO.  Applicant will be available during normal business hours to assist with customer service problems.
29.	If Applicant intends to provide payphone service, will the equipment utilized comply with FCC requirements and Finding (9) of the Commission Order entered in Docket No. 84-0442 on June 11, 1986, including, but not limited to: (a) touch dialing; (b) access to 9-1-1 and "0" operator dialing without use of a coin; (c) rules governing use of payphones by disabled persons; (d) ability to complete local and long-distance calls; (e) unlimited duration for local calls; and (f) a message explaining the telephone's general operations, dialing instructions for emergency assistance, payphone owner's name, method of reporting service problems and method of receiving credit for faulty calls?
	☐ YES ☐ NO. Not Applicable
	Respectfully Submitted,
	PREMIER TELECOM, INC.
	Ives Santos
	Ivis Santos, President

## VERIFICATION

This application shall be verified under oath.

## **OATH**

FLORIDA ETUGICO
) ss
BROWARD (CECTIO) State of

County of

Ivis Santos makes oath and says that he is President of Premier Telecom, Inc. that he has examined the foregoing application and that to the best of his knowledge, information, and belief, all statements of fact contained in the said application are true, and the said application is a correct statement of the business and affairs of the above-named applicant in respect to each and every matter set forth therein.

Jvis a fun to \$

Ivis Santos, President

Subscribed and sworn to before me, a Notary Public

in the State and County above named, this <u>13</u> day of August 2002.